

**Live Well Alliance Meeting Minutes**  
**September 25, 2007**

What Did We Do?	What Was Most Helpful?	What Would You Like To See?
<ul style="list-style-type: none"> <li>❑ There was discussion about not forgetting to include low-income, low education, or ethnic populations. Ms Markenson said she wanted to focus on the main message first and get it out to as many people as possible. Then we could provide more attention to special groups.</li> <li>❑ There was discussion about how to introduce the messages. Mr. Karlovic said that in order for people to remember a message they had to be exposed to it more than 20 times. He suggested that we use the methods that would expose people the most times to a message and get the most effect for the dollars we had to spend.</li> <li>❑ Ms Markenson asked if we would like to have more meetings. Is there sufficient interest from the group? The consensus was that we would have them in the spring and fall. One person suggested that we time them to match the Adolescent Campaign meetings so that the out-of-town” people would only have to make one trip and not two.</li> <li>❑ Someone asked about the radio campaign and if it was being used. Ms Markenson said that it was</li> </ul>	<ul style="list-style-type: none"> <li>❑ Formative Research was most helpful. It was based on good empirical research.</li> <li>❑ The process was efficient. There were a reasonable number of people who were consistent in their approach. They were not flighty and stuck to the task at hand.</li> </ul>	<ul style="list-style-type: none"> <li>❑ A suggestion was made that we put some kind of “out of stock” sign on the online order form, and could we back order things when they came in?</li> <li>❑ There was a question about whether an agency could personalize the material. Ms. Markenson explained that we left blank spaces on most of the material where they could put their own labels.</li> <li>❑ There was a question about whether our materials are available in other languages. Ms Markenson said that they are not.</li> <li>❑ It was noted that stress is a big contributor to our health problems and that maybe we could include it in the Chronic Disease program</li> <li>❑ Can we reach people through Human Relations? – payroll stuffers, etc.</li> <li>❑ One of the AAAs asked if there was any way we could track orders so that she would know when one of her agencies had ordered material and thus avoid duplication</li> </ul>

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<p>being used in the metro markets – Kansas City, St. Louis and Springfield.</p> <ul style="list-style-type: none"> <li>❑ There was a question about how the money was spent and how much was left. Ms Markenson explained that we were expecting more money and should have more materials printed and in the warehouse by the end of October</li> <li>❑ There was a question about evaluating the program. Ms Markenson said that has been anticipated. There will be a telephone survey in Nov 2007, June 2008 and November 2008 that will encompass about 50,000 Missourians. That will provide the base line and thereafter the survey will be rolled into the BRFSS questionnaire. Eric Karlovic suggested that the Nov 2008 survey be rolled into 2009 in order to avoid the election cycle</li> <li>❑</li> </ul>		
<p><b>Next Steps:</b></p> <ul style="list-style-type: none"> <li>❑ Hughes will continue to work on the strategic plan.</li> <li>❑ DHSS will evolve the web site to make it more user-friendly and contemporary.</li> <li>❑ DHSS will set up the meeting schedule for 2008.</li> </ul>	<p><b>Timetable</b></p> <ul style="list-style-type: none"> <li>❑ We are looking at having the strategic plan available in about a month.</li> <li>❑ The next meeting is tentatively scheduled for November 26. The place has not yet been determined.</li> </ul>	

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<ul style="list-style-type: none"><li>❑ DHSS will continue to work on the activities list and make it available on the web site. That way the participants can see what is being done in other areas and give them other ideas of what might work for them.</li><li>❑ DHSS will continue to encourage involvement among the various health care groups.</li></ul>		
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